PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | SMALL TYPE | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | |
|---|--|---|---|---------------------------------------|--------------|------------------|--------------------|------------------------|----------------------------|---------------------|------------------------|
| TOTAL CLAIMS | | | 15 | | | | RATE | FEE | 1 | RATE | FEE |
| FOR | | | NUMBER | FILED | NUMBE | R EXTRA | BASIC FI | E 355.00 | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | ' | nus 20= * | 0 | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | | nus 3 = * | 0 | | X40= | | OR | X80= | |
| ML | JLTIPLE DEPEN | IDENT CLAIM P | RESENT | · · · · · · · · · · · · · · · · · · · | | | +135= | | OR | +270= | |
| * If the difference in column 1 is | | | less than zero, enter "0" in column 2 | | | TOTAL | · · | OR | TOTAL | 71000 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | CMALL | . ENTITY | - OR | OTHER SMALL | THAN |
| <u> </u> | | (Column 1) CLAIMS | ALCOHOLOGICA STATE | HIGHE | | (Column 3) | - OMALI | | 7 | - OWALL | |
| AMENDMENT A | The same | REMAINING AFTER AMENDMENT | | NUMBE PREVIOU PAID FO | JSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . 20 | Minus | ** 2 | 0 | = | X\$ 9= | | OB. | X\$18= | |
| | Independent | NTATION OF M | Minus | PENDENT (| | = | X40= | | OR | X80= | |
| - | | | | LINDENT | OL/ WIVE | | +135= | | OR | +270= | |
| | | | | | | | TOTA ADDIT. FE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Columi | n 2) | (Column 3) | 7,0071.7 E | | • | 7.55m.722 | . * |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | A three boards are the second of the second | HIGHES NUMBE PREVIOU PAID FO | ER JSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | <u> </u> | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | X40= | | OR | X80= | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | |
| | | | | | | | +135= | | OR | +270= | |
| | | | | | | | TOTA ADDIT, FEI | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Columr | n 2) | (Column 3) | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHES NUMBE PREVIOU PAID FO | ER JSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | X40= | | | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | OR | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | +135= | | OR. | +270= | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE | | | | | | | | | | | |
| | The "Highest Num | ber Previously Pai | d For" (Total or | Independen | it) is the l | highest number | found in the a | ppropriate bo | x in co | lumn 1. | |